

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		25	04-14-98
FORMALITY REVIEW	KAT	M-2	5/4/98

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	2	9
2	✓	11	20
3	✓	8	01
4	✓	4	✓
5	✓	5	✓
6	✓	8	✓
7	✓	1	✓
8	✓	8	✓
9	✓	0	✓
10	✓	10	✓
11	✓	11	✓
12	✓	12	✓
13	✓	13	✓
14	✓	14	✓
15	✓	15	✓
16	✓	16	✓
17	✓	17	✓
18	✓	18	✓
19	✓	19	✓
20	✓	20	✓
21	✓	21	✓
22	✓	22	✓
23	✓	23	✓
24	✓	24	✓
25	✓	25	✓
26	✓	26	✓
27	✓	27	✓
28	✓	28	✓
29	✓	29	✓
30	✓	30	✓
31	✓	31	✓
32	✓	32	✓
33	✓	33	✓
34	✓	34	✓
35	✓	35	✓
36	✓	36	✓
37	✓	37	✓
38	✓	38	✓
39	✓	39	✓
40	✓	40	✓
41	✓	41	✓
42	✓	42	✓
43	✓	43	✓
44	✓	44	✓
45	✓	45	✓
46	✓	46	✓
47	✓	47	✓
48	✓	48	✓
49	✓	49	✓
50	✓	50	✓

Claim	Final	Original	Date
51	✓	51	✓
52	✓	52	✓
53	✓	53	✓
54	✓	54	✓
55	✓	55	✓
56	✓	56	✓
57	✓	57	✓
58	✓	58	✓
59	✓	59	✓
60	✓	60	✓
61	✓	61	✓
62	✓	62	✓
63	✓	63	✓
64	✓	64	✓
65	✓	65	✓
66	✓	66	✓
67	✓	67	✓
68	✓	68	✓
69	✓	69	✓
70	✓	70	✓
71	✓	71	✓
72	✓	72	✓
73	✓	73	✓
74	✓	74	✓
75	✓	75	✓
76	✓	76	✓
77	✓	77	✓
78	✓	78	✓
79	✓	79	✓
80	✓	80	✓
81	✓	81	✓
82	✓	82	✓
83	✓	83	✓
84	✓	84	✓
85	✓	85	✓
86	✓	86	✓
87	✓	87	✓
88	✓	88	✓
89	✓	89	✓
90	✓	90	✓
91	✓	91	✓
92	✓	92	✓
93	✓	93	✓
94	✓	94	✓
95	✓	95	✓
96	✓	96	✓
97	✓	97	✓
98	✓	98	✓
99	✓	99	✓
100	✓	100	✓

Claim	Final	Original	Date
110	✓	110	✓
111	✓	111	✓
112	✓	112	✓
113	✓	113	✓
114	✓	114	✓
115	✓	115	✓
116	✓	116	✓
117	✓	117	✓
118	✓	118	✓
119	✓	119	✓
120	✓	120	✓
121	✓	121	✓
122	✓	122	✓
123	✓	123	✓
124	✓	124	✓
125	✓	125	✓
126	✓	126	✓
127	✓	127	✓
128	✓	128	✓
129	✓	129	✓
130	✓	130	✓
131	✓	131	✓
132	✓	132	✓
133	✓	133	✓
134	✓	134	✓
135	✓	135	✓
136	✓	136	✓
137	✓	137	✓
138	✓	138	✓
139	✓	139	✓
140	✓	140	✓
141	✓	141	✓
142	✓	142	✓
143	✓	143	✓
144	✓	144	✓
145	✓	145	✓
146	✓	146	✓
147	✓	147	✓
148	✓	148	✓
149	✓	149	✓
150	✓	150	✓

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)